**South Dakota Arts Council** 711 E. Wells Ave., Pierre, SD 57501 (605) 773-3301 or 1-800-952-3625 Website: www.artscouncil.sd.gov

## **Excursion Grant Application**

Read page 105 for grant guidelines. Make a copy of the application for your files before submitting.

Applicant Organization (Please type or print)			TIN Number
Address	City/State/Zip (		County
Titules	Oity/outite 2.ip	Joue	Councy
Telephone	E-mail Address	;	
The person in charge of this excursion:			
Contact Person	Daytime Phone	<u> </u>	Evening or Message Phone
Address	City/State/Zip (	Code	E-mail Address
Grant Application Codes (see Pages 14-17):  Applicant Status Applicant Institution Applicant Discipline Project Discipline Type of Activity Arts Education Project Descriptors Project Race Grantee Race	Date: Location: Sponsor: Mileage from (( and back (round trip) We will transport Total transportation c Grant Request \$	Our Town) ) is persoonst is \$	
If approved, the authorizing official will be sent an Evaluation form in the South Dakota Arts Council of No funding will be granted unless the Evaluation  AGREEMENT: I certify that the application information is true a result of this application are to be used for the purposes set forth abide by the relevant Terms, Conditions and Guidelines as printed duplicate submitted documentation for use in the grant review production.  Authorizing Official:	office.  It is received within 30 days and complete to the best of my learning. It is agreed that the und do in the SDAC Guide To Grants.	ays after the Excu	ursion.  d and agree that any funds granted as a ual authorized to commit the applicant to
Address City/To	wn	Zip	Telephone